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FAX NO. 8475382847

P. 02/03



PART B - FEE(S) TRANSMITTAL

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Sheila Manterino	(Depositor's Name)
<i>Sheila Manterino</i>	(Signature)
May 10, 2006	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/670,870	09/27/2000	BOAZ OR SIRAGA	CM00914S	6829

TITLE OF INVENTION: ECHO SUPPRESSION AND ECHO CANCELLATION

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$0	\$1400	06/30/2006

EXAMINER	ART UNIT	CLASS-SUBCLASS
SWERDLOW, DANIEL	2615	379-406080

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.33).

Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OK, alternatively,
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1 Val Jean Hillman

2 Valerie M. Davis

3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

MOTOROLA, INC.**SCHAUMBURG, IL**Please check the appropriate assigned category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

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Authorized Signature *[Signature]*

Date May 10, 2006

Typed or printed name Valerie M. Davis

Registration No. 50,203

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Motorola, Inc.
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1101/3rd Floor
Schaumburg, IL 60196
Telephone: 847-576-6733
Facsimile: 847-576-0721

3

Number of Pages (including this page)

Date: May 10, 2006

To: EXAMINER SWERDLOW, DANIEL

Location: United States Patent and Trademark Office

Fax No.: 571-273-2885

From: Valerie M. Davis, Registration No. 50,203

Subject: **09/670,870 OR-SHRAGA, ET AL.** Confirmation No.: 6829

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